



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 095400005

CITY OR TOWN PAXTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PAXTON POST #306 AMERICAN LEGION INC.

DOING BUSINESS AS

ADDRESS 885 PLEASANT ST.

CITY/TOWN: PAXTON

STATE: MA

ZIP CODE: 01612

MANAGER: SAVAGE,
THOMAS SR

TYPE OF LICENSE: Veterans club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY FRAME BLDG CONTAINING 2 ROOMS ON THE MAIN FLOOR, AND A CELLAR
CONTAINING 3 ROOMS, ONE OF WHICH IS FOR STORAGE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 095400006

CITY OR TOWN PAXTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: ANNA MARIA COLLEGE

DOING BUSINESS AS

ADDRESS SUNSET LANE

CITY/TOWN: PAXTON

STATE: MA

ZIP CODE: 01612

MANAGER: Calareso, Jack P.

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR CONTAINING AN AUDITORIUM, LIBRARY (6) ROOMS 2
LOUNGES, OFFICES, KITCHENETTE, CHAPLAIN'S SUITE, CAMPUS CENTER BLDG, 2 FLRS,
DOWNSTAIRS-POST OFFICE, BOOKSTORE, SNACK BAR, 3 ADJOINING ACTIVITY ROOMS TO
BE USED AS SOCIAL ROOM, 5 OFFICES, MAIN DINING ROOM, 2 SMALL DINING ROOMS

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2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 095400007

CITY OR TOWN PAXTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: NEIL & YASH CORPORATION

DOING BUSINESS AS PAXTON LIQUORS

ADDRESS 683 PLEASANT ST

CITY/TOWN: PAXTON

STATE: MA

ZIP CODE: 01612

MANAGER: PATEL, MEHUL

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY BRICK BLDG CONTAINING 3 ROOMS WITH A CELLAR FOR STORAGE

I hereby certify and swear under penalties of perjury that:

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3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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Please Check Below:

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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 095400009

CITY OR TOWN PAXTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PIMENTEL REALTY TRUST CORP.

DOING BUSINESS A PAXTON MARKET PLACE

ADDRESS 707 PLEASANT STREET

CITY/TOWN: PAXTON

STATE: MA

ZIP CODE: 01612

MANAGER: ROBLES,
CONSUELO

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

LOCATED IN PAXTON SHOPPING CENTER. TOTAL AREA OF BLDG 8000 SQ FT. TOTAL
SELLING AREA 6500 SQ FT. BACK ROOM AREA 1000 SQ FT, MEAT ROOM IS 500 SQ FT.
BEER AND WINE DISPLAYED IN ONE LOCATION

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SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 095400011

CITY OR TOWN PAXTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PAXTON SPORTS CENTRE, INC

DOING BUSINESS AS

ADDRESS 603 PLEASANT ST

CITY/TOWN: PAXTON

STATE: MA

ZIP CODE: 01612

MANAGER: GUTERMAN,
PETER S.

TYPE OF LICENSE: Club

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FOOD AND BEVERAGES UPSTAIRS IN LOUNGE

I hereby certify and swear under penalties of perjury that:

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TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 095400012

CITY OR TOWN PAXTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: KETTLEBROOK GOLF COURSE INC.

DOING BUSINESS AS KETTLEBROOK GOLF CLUB

ADDRESS 136 MARSHALL STREET

CITY/TOWN: PAXTON

STATE: MA

ZIP CODE: 01612

MANAGER: MARRONE,
DONALD J.

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

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